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CONFIRMATION NO. 6026

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|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10/848,903 | FILING DATE<br>05/19/2004<br><br>RULE | CLASS<br>165 | GROUP ART UNIT<br>3753 | ATTORNEY DOCKET NO.<br>P2003J053 |
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\*\* CONTINUING DATA \*\*\*\*\* *OK* *TSU*

This appln claims benefit of 60/480,921 06/24/2003  
and claims benefit of 60/511,623 10/15/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None* *TSU*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/26/2004

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>VA | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials   |                           |                        |                       |                            |

## ADDRESS

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## TITLE

Anti-vibration tube support

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>920 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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